

NON-INTENSIVE FAMILY PRESERVATION SERVICES PROGRAM MONITORING

Agency Name: _____

Review Date: ____/____/____

Review Period: ____/____/____ to ____/____/____

Lead Reviewer: _____

INSTRUCTIONS:

IFPS providers should complete this form prior to the on-site monitoring visit. The process of completing the form allows providers to prepare for the monitoring visit, and the resulting information will expedite the on-site review.

You will note that space is provided at the end of each section for "Special Information." Please use this space to describe any special circumstances, comments, or to clarify the preceding information.

NOTE: Please have all materials used to complete the form available for review during the on-site monitoring visit.

PROGRAM DESIGN AND OPERATION:

1. In reviewing your monthly reports from the Non-Intensive Family Preservation Information Management System, do they accurately capture program activity and data collected for this review period?

Yes_____

No_____ [If yes, please sign verification form provided]

If not, please explain any discrepancies in the space provided at the end of this section.

2. Were Open Caseload Logs and Closed Case data information provided by the 15th of each month to the Planner/Evaluator?

Yes_____

No_____

3. Is there evidence of on-going collaboration with other service delivery systems (i.e., the local Department of Social Services, Area Mental Health programs, juvenile justice and other relevant public and/or non-profit agencies] through joint participation in team meetings, on-going interagency collaborative meetings, or close communication via phone or e-mail?

Yes_____

No_____

4. Does the Agency have written referral policies and procedures? If yes, please have policies and procedures available for review.

Yes_____

No_____

5. Is documentation provided verifying a response time of within 3 days from date of referral?

Yes_____

No_____

6. Is documentation provided for all cases reflecting the maximum service provision time of six months?

Yes_____ No_____

7. Is documentation provided verifying that at least one-half of a caseworker's time is spent in face to face contact in the family home, with the family, and/or within the community on the family's behalf?

Yes_____ No_____

8. What was the average caseload of Non-IFPS workers during the review period?

_____ per worker

9. Are the following services routinely provided to families in a culturally competent manner:

Family assessment
Intensive family and individual counseling
Client advocacy
Case Management
Development and enhancement of parenting skills
Referral to other services as appropriate

Yes_____ No_____

If not, please check service(s) not provided and explain reason(s) below.

10. Are children and families routinely assessed for and referred to appropriate services upon termination of Non-IFPS/FPS services?

Yes _____ No_____

11. Are Non-IFPS services regularly available during times of crisis/emergency outside of traditional work hours (i.e., after 5:00 and on weekdays)?

Yes_____ No_____

12. Are Non-IFPS service caseloads within the two to eight family limit? .

Yes_____ No_____

SPECIAL INFORMATION ON PROGRAM DESIGN AND OPERATION:**SUPERVISION AND SUPPORT SERVICES:**

1. How many total people serve as supervisors for Non-IFPS programs at the Agency?_____
2. How many full-time equivalents (FTEs) are assigned to the supervision of Non-IFPS workers?

3. How many Non-IFPS workers are employed by the Agency?_____
4. How many Non-IFPS workers are assigned to the IFPS supervisor(s)?_____
5. On average, how often do Non-IFPS staff/case consultation meetings occur?_____
6. On average, how much individual supervision/consultation do Non-IFPS workers receive each week?

7. Does the Agency have a written plan for the provision for back-up services to families when Non-IFPS workers are not available? If yes, please have plan available for review.

Yes _____ No _____
7. Does the Agency have a written plan for the provision of consultation to Non-IFPS workers 24 hours a day, 7 days a week?

Yes _____ No _____
9. On average, how often does the supervisor accompany each Non-IFPS worker on initial screenings and/or home visits?_____
10. How many family interventions has the IFPS supervisor provided during the review period?

11. Does the Agency have policies and procedures that address the special needs of Non-IFPS workers and their work in order to maintain employee health and prevent worker burn-out?

Yes_____ No_____

SPECIAL INFORMATION ON SUPERVISION AND SUPPORT SERVICES:**ADMINISTRATIVE SERVICES:**

1. Does the program have written policies concerning qualifications for Non-IFPS supervisors and workers? If yes, please have policies available for review.
Yes _____ No _____
2. Have staff been provided relevant pre-service training?
Yes_____ No_____
3. Does the program have written job descriptions for Non-IFPS supervisors and workers? If yes, please have job descriptions available for review.
Yes _____ No _____
4. How many Non-IFPS workers have provided services during the review period?

5. What is the average tenure (in months) of Non-IFPS workers who departed during the review period?

SPECIAL INFORMATION ON ADMINISTRATIVE SERVICES:**TRAINING SERVICES**

1. Does the Agency have a written plan for orientation and training of new workers and for ongoing staff development? If yes, please have plan available for review.
Yes _____ No _____
2. Of the Non-IFPS workers beginning employment with the Agency during the review period:

- a. How many received Family Preservation training within 90 days of their first date of employment?

- b. How many were trained more than 90 days after their first date of employment?

3. Are services provided in a culturally competent manner in that staff are provided training in cultural competence, or the cultural background of staff reflect the cultural background of families served?
Yes_____ No_____
4. On average, how many hours of in-service training (formal and informal, ex: workshops, seminars, conferences, etc.) did Non IFPS workers receive?_____
5. List in-service training topics and attach.

Special Information on Training Services:

STAFF COMPOSITION AND TENURE: (Attached)

RECORD KEEPING:

1. Are records securely stored and kept in an orderly and consistent fashion?
Yes _____ No _____
2. Are copies of signed releases, referrals, and other pertinent data included in each case file?
Yes _____ No _____
3. Is the child's imminent risk for current or future role dysfunction criteria recorded predominately in each case file?
Yes _____ No _____
4. Are case notes legible and brief?
Yes _____ No _____

NON-INTENSIVE FAMILY PRESERVATION SERVICES MONITORING PROCESS

INTENT: To insure the quality and consistency of Non-IFPS services provided across all systems and to monitor program compliance as follows:

- ◆ Evaluate level of adherence to the Family Preservation Services Policies and Standards issued by the North Carolina Department of Health and Human Services (formerly, the Department of Human Resources).
- ◆ Evaluate the needs of programs and workers by providing the means by which to identify and report common programmatic issues that may require attention. Such issues may need to be addressed via on-site technical or clinical assistance, special staff training, further exploration or resolution at some level (i.e., as a function of the Family-Centered Services Interdisciplinary Steering Committee and/or addressed by DHHS management).
- ◆ Promote on-going dialogue, support, and partnership between state and program staff to better insure the safety of children and the strengthening of families through appropriate, effective, equitable, culturally competent, strength-based, and family-centered application of North Carolina's Non-Intensive Family Preservation Services Program.

DESCRIPTION: North Carolina's Non-Intensive Family Preservation Services Program is currently being provided by local departments of social services and private, non-profit agencies. This Monitoring Process is designed to foster consistent application of services by all systems. The Non-IFPS monitoring process is designed to foster support and partnership with those programs providing these services and is characterized by the following:

- ◆ On-going self-monitoring at both the local and state levels
- ◆ Administered via a state level interdepartmental collaboration of Program Consultants and enhanced by a Peer-Review component
- ◆ Annual on-site review of program implementation, administration and fiscal management of all programs providing these services, in accordance with the model prescribed by the Policies and Standards
- ◆ Utilization of the team approach, with a minimum of 3 reviewers per review
- ◆ Interdisciplinary through state level collaboration and the Peer Review Component

PREPARATION SCHEDULE: That all Non-IFPS programs be monitored during the 1st quarter of each calendar year (January, February, and March) and that these on-site visits be limited to a one-day period whenever possible. However, exceptions may be necessary. The review period will be the same for all programs; covering the 6-month period that ends December 31 of the previous year-unless otherwise indicated. The following schedule should meet this objective:

- ◆ In January of each year, all responsible state Program Consultants and Peer Reviewers will collaborate to develop an *Annual Monitoring Schedule* that will indicate their availability and travel preferences
- ◆ In February of each year, the Lead Reviewers (the assigned state Program Consultant) will be responsible for consulting with his/her program, peer reviewers, and other state consultants (when applicable) to establish a final date for the monitoring visit
- ◆ As a result, an annual Monitoring Schedule will be compiled, published and distributed to all programs, reviewers, and the Interdisciplinary Steering Committee by March 1 of each year
- ◆ 1 to 1 1/2 months prior to the scheduled review date, the Lead Reviewer will send the *Monitoring Packet* to the program for completion. This packet will include the following:
 - *Cover letter.* This official notification will announce the date/time and review period, the names of the reviewers, and instructions
 - *Non-IFPS Program Monitoring Form.* The program will be instructed to thoroughly complete and copy this self-monitoring tool and provide copies for reviewers to reference during the visit.
 - *Non-IFPS Program Data Report.* This report will be obtained from the Program Planner/Evaluator, and will reflect activities and open and/or closed cases accumulated during the review period. The program will be instructed to review and reconcile, if necessary
 - And any additional information, surveys, etc. as necessary.

THE REVIEW TEAM COMPOSITION:

- ◆ The Lead Reviewer - state Program Consultant assigned to program
- ◆ Peer Reviewer #1 - a peer selected to insure an interdisciplinary perspective
- ◆ Family/Consumer Representative Reviewer [component to be developed]
- ◆ Fiscal Reviewer [Lead Reviewer will fulfill this task]
- ◆ Other Reviewers, as deemed necessary:
 - Co-Lead Reviewer(s) - additional state Program Consultant(s) when a state-level interdisciplinary review is indicated
 - Peer Reviewer #2 - an option when the size of program and subsequent volume of cases indicate Clinical Consultant (optional, unless otherwise indicated)
 - Planner/Evaluator (optional unless otherwise indicated)

ON-SITE PROCEDURE:

◆ Opening Session

- Meet with upper management, supervisor and workers who should provide all reviewers with a copy of their completed Form Non-IFPS.
- Lead Reviewer initiates introductions, describes process and makes other remarks, as necessary.
- The Program Supervisor (or representative) will provide a tour of the site, housekeeping information, and suggest meal options, etc.
- A joint review of the Program Monitoring Form should take place at this time. This includes a review and approval of the required
- The Lead Reviewer or Statistical Assistance (if present) can provide feedback to program about its reporting performance, and highlight other opportunities for special commendation.

◆ Program Policy & Documentation Review Session: If specified program policies and documents *have not been* reviewed and approved since June 30, 1997, or have been revised since last review, a designated reviewer will examine as follows:

- Referral Policies & Procedures
- Plan for ensuring that family members have access to Non IFPS worker after hours
- Back-up Services Plan to families when Non-IFPS worker is not available
- Consultation Plan
- Policies concerning Worker & Supervisor Qualifications
- Job Descriptions for Workers & Supervisor
- Plan for Staff Orientation and Training
- Data supporting staff development efforts (in-service training, workshops, conferences, etc.)
- Time Sheets
- Budget

- ◆ **Case Review Session:** A random sampling of cases will be determined on-site at the beginning of the session. The number to be reviewed will be based on a minimum of 30% of all cases open and/or closed during the review period and maximum of 5 *cases per reviewer*, depending on the total volume.
 - Designated reviewers will read records, according to check-list and log provided, to determine if each record contains key components as described by the NC Family Preservation Services Policies and Standards for non *intensive* services.
 - Case reviewers will highlight cases that warrant another perspective requiring another reviewer to render a second impression. All reviewers will discuss their impressions, observations, concerns, questions to arrive at a consensus about the program's overall record-keeping system and quality of documentation.
 - Case reviewers will prepare a verbal feedback report that will include any praiseworthy comments, questions or concerns they may have
- ◆ **Interview Session:** Designated reviewer(s) will conduct brief interview with the following:
 - Direct Non-IFPS Staff
 - Non-IFPS Supervisor
 - One family member from at least *two different families* who have received or are currently receiving services
 - DSS or other collaborating agency representative
 - Fiscal Officer
- ◆ **Closing Session:** For approximately one hour, Lead Reviewer will lead feedback discussion at the conclusion of the visit. Feedback should include preliminary and a recap of program's questions, concerns and suggestions for follow-up.